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## BIB DATA SHEET

CONFIRMATION NO. 5264

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
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**APPLICANTS**Gerald Lange, Lutzhorn, GERMANY; *39***\*\* CONTINUING DATA \*\*\*\*\***This application is a 371 of PCT/EP03/06365 06/17/2003 *39***\*\* FOREIGN APPLICATIONS \*\*\*\*\***GERMANY 102 28 163.7 06/24/2002 *39***\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***

Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance <i>Initials</i>	GERMANY	2	1

**ADDRESS**

DORITY & MANNING, P.A.  
 POST OFFICE BOX 1449  
 GREENVILLE, SC 29602-1449  
 UNITED STATES

**TITLE**

Protective device for pacemaker patients or stoma patients

<b>FILING FEE RECEIVED</b> 1150	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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